

# Work Order ID 76040

**\*76040\***

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November 3, 2011 10:37:34 AM

Item ID: D3636-041 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Shoulder Harness  
 Start Date: 11/03/11 Start Qty: 4.00 **\*4\*** Cust Item ID:  
 Required Date: 11/25/11 Req'd Qty: 4.00 **\*4\*** Customer:  
 Reference:

Approvals: Process Plan: CL Date: 11/11/03 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3636	Rev B								

100 PURCHASING 0.00  
**\*100\***  
 Purchasing Memo 0.00  
 Purchasing Issue P/O: 15357  
 Purchase Part Number: P/N 3104-1-061-2396  
 AMSAFE INC., PHOENIX, ARIZONA  
 Certificate of conformity is required

Supplier:

11-11-03  
(4)

110 Receive & Inspect for Damage & Mat'l Certs 0.00  
**\*110\***  
 Packaging Memo 0.00  
 Packaging Ensure certificate of conformity is attached

11/11/21  
(4)

120 QC6- Inspect dimensions to drawing 0.00  
**\*120\***  
 QC Memo 0.00  
 Quality Control

8/11/122

(4)

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Work Order ID 76040

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November 3, 2011 10:37:34 AM

Item ID: D3636-041 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Shoulder Harness  
 Start Date: 11/03/11 Start Qty: 4.00 **\*4\*** Cust Item ID:  
 Required Date: 11/25/11 Req'd Qty: 4.00 **\*4\*** Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location: <i>ST 266b</i>	0.00							
<b>*130*</b>									
Packaging	Memo	0.00							
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
<b>*140*</b>									
QC	Memo	0.00							
Quality Control									

*(X) Sp 11-11-22*

*11/11/23*

*ME 11-11-23*

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Picklist Print

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Page 1

Work Order ID: 76040

Parent Item: D3636-041

Parent Item Name: Shoulder Harness

Start Date: 11/03/11

Required Date: 11/25/11

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP Rev:A revA as per dwg 08-01-09 DD verified by LL 08/01/09

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3636-041P Shoulder Harness		Purchased	No			110	Each	0.0000	1	4			

03109-1-061-2396

Purch 4

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

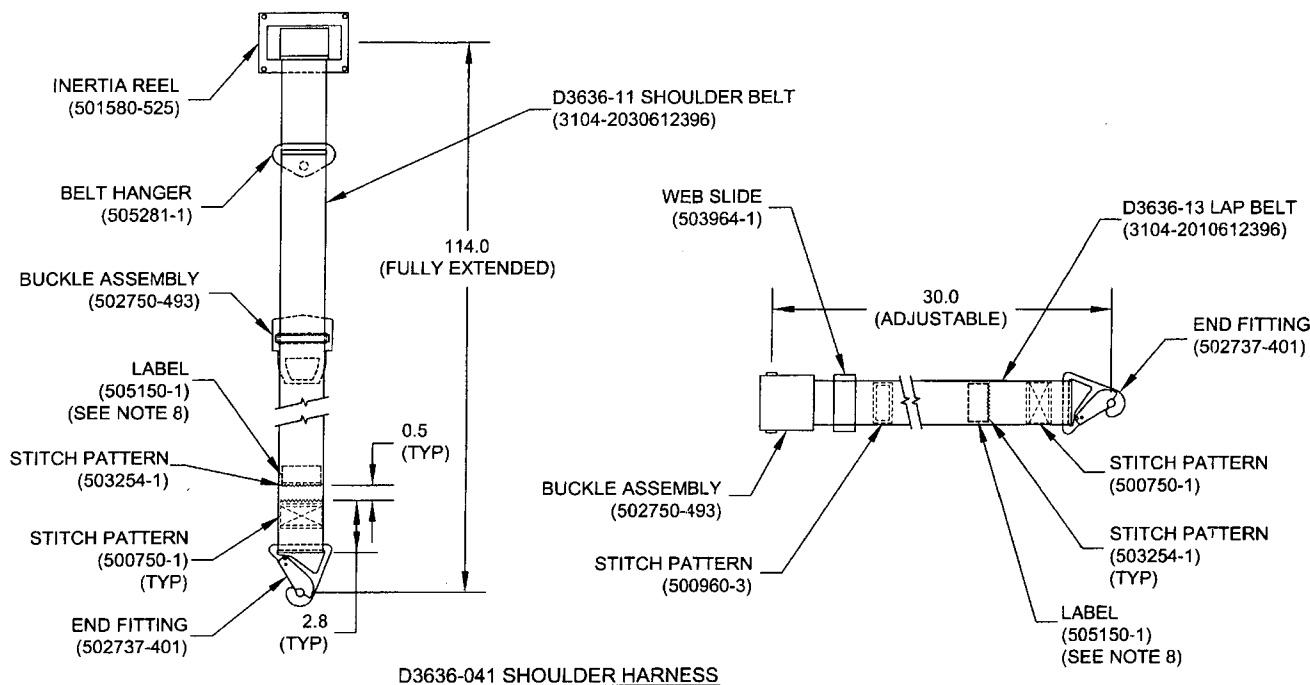
Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# SPECIFICATION CONTROL DRAWING



## NOTES:

- 1) DESCRIPTION: 3-POINT SHOULDER HARNESS WITH LEVER STYLE BUCKLE AND CHROME HARDWARE PLATING  
2" BLACK NYLON WEBBING, STYLE T1200-5 WHICH MEETS REQUIREMENTS OF TSO-C114  
WITH MINIMUM STRENGTH OF 2500 LBS
- 2) PURCHASE INFO: P/N 3104-1-061-2396 (D3636-041)  
AMSAFE INC., PHOENIX, ARIZONA
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 1.7 lbs
- 8) LABEL TO INCLUDE: DART AEROSPACE P/N D3636-11/-13  
(613) 632-3336

c2111103  
w10.76040

RELEASED  
07.11.14

B	NEW HARNESS P/N'S; REFERENCE TSO-C114	LE	07.10.16
A	NEW ISSUE; REPLACES G10601	LE	07.07.27
REV.	DESCRIPTION	BY	DATE
DESIGN	CV		
DRAWN	LE		
CHECKED	PH		
MFG. APPR.	N/A		
APPROVED			
DE APPR.			
DATE	07.10.16		

<b>DART AEROSPACE USA, INC</b>	
PORT HADLOCK, WA	
DRAWING NO. D3636	REV. B
TITLE SHOULDER HARNESS	SCALE NTS
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Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID **PO15357**

Purchase Order Date 11/3/2011

PO Print Date 11/3/2011

Page Number 1 of 1

**Order From :**

VU-AMS001

AMSAFE INC.  
LOCKBOX #5  
P.O BOX 53075  
PHOENIX, AZ 85072-3075  
US

**Contact Name**

**Vendor Phone** 602 850 2850

**Vendor Fax** 602 850 2812

**Vendor Account Nbr**

**Buyer**

Brigitte Golden

**Requisition Nbr**

**Tax Resale Nbr**

10127-2607

**Terms**

Net 30

**Currency**

USD

**FOB**

Destination-Collect

**Ship To :**

DART AEROSPACE LTD 1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	D3636-041P	Shoulder Harness	11/25/2011 Yes	4.00 Each	FedEx PI collect	\$275.5800	\$1,102.32

**Special Inst:** As per DWG: D3636  
Rev: B  
B76040  
P/N: 3104-1-061-2396

**PO Total:** \$1,102.32

**Change Nbr:** 1

**Change Date:** 11/3/2011

No substitution or deviation without  
consent.  
Certificate of Conformity or Material  
Certification required when applicable



**AMSAFE****AMSAFE AVIATION**

1043 NORTH 47th AVENUE

PHOENIX, AZ 85043

PH (602)850-2850 FAX (602)850-2812

**SHIPPER/CERTIFICATION**

<b>CUSTOMER NO.</b>
10006113

<b>SALES ORDER NO.</b>
S221653

<b>BOL NO.</b>
000250404

<b>DATE PRINTED</b>
11/19/11

<b>PAGE NO.</b>
1

DART AEROSPACE  
1270 ABERDEEN STREET  
HAWKESBURY  
ONTARIO, CANADA K6A 1K7  
Canada

DART AEROSPACE LTD.  
1270 ABERDEEN ST  
HAWKS BURY,, ON K6A 1K7  
Canada

<b>CUSTOMER ORDER NO.</b>
PO15357

<b>TERMS</b>
NET30

<b>FREIGHT</b>
COLLECT

<b>SHIP VIA</b>
FedEx P1 10:30 AM

<b>F.O.B.</b>
ORIGIN

Ship to ID: 10006125

Sales Order Remarks: 1517-9324-0  
Remarks:

SHIPMENT REFERENCE 000250404

LINE	ITEM NUMBER / DESCRIPTION	DRAWING AND CERTIFICATIONS	DUE DATE	QTY ORDERED	QTY SHIPPED	QTY BACK ORDERED
1	Cust. Item No.: D3636041 3104-1-061-2396 REST SYS ASSY	DRAWING: 3104 REV: G CERT: TSO-C114 Lot/Serial Numbers Shipped Quantity S221653-1	2011-11-23	4 Expire Ref.	4	0

*Duliz*

I certify that the article(s) listed above conform to all applicable design data, and (as applicable):

FAA PMA, FMVSS 209, FMVSS 302, 14 CFR 25.853, DFARS 252-225-7009

FAA TSO C22f, C22g, C114 or TSO Plus

The conditions and tests required for TSO approval of the article(s) are minimum performance standards. It is the responsibility of those installing the article(s) either on or within a specific type or class of aircraft to determine that the aircraft installation conditions are within the standards applicable to the TSO article including (when applicable) the integrated non-TSO function. The non-TSO function is described in the seat belt airbag system including the inflator cable assembly and electrical components that have not been evaluated for functionality or installation requirements. TSO articles including the integrated non-TSO function must have separate approval for installation in an aircraft. The article(s) may be installed only if performed under 14 CFR part 43 or the applicable airworthiness requirements. Product shipped meets all material, processing and test requirements. Certifications/Test reports as applicable are retained on file at AmSafe Aviation.

AmSafe Authorized Signature: X Jesse Ochoa

Printed Name: Jesse Ochoa

NOV 19 2011

Dated: 11/19/11

COUNTRY OF ORIGIN USA

<b>1. Approving National Aviation Authority/Country:</b>  FAA/United States		<b>2. AUTHORIZED RELEASE CERTIFICATE</b> <b>FAA Form 8130-3, AIRWORTHINESS APPROVAL TAG</b>				<b>3. Form Tracking Number:</b>  5221653-1-NW	
<b>4. Organization Name and Address:</b> AmSafe Aviation 1043 North 47th Avenue Phoenix, Arizona 85043		<b>Cert. No. PT1967NM</b>				<b>5. Work order/Contract/Invoice Number:</b> S221653 - 1 <input type="radio"/> PAGES ATTACHED	
<b>6. Item:</b>	<b>7. Description:</b>	<b>8. Part Number:</b>	<b>9. Eligibility: *</b>	<b>10. Quantity:</b>	<b>11. Serial/Batch Number:</b>	<b>12. Status/Work:</b>	
1	REST SYS ASSY	3104-1-061-2396	N/A	4	A1111	NEW	
<b>13. Remarks:</b> Drawing: 3104 Rev: G TSO: TSO-C114							
EXPORT AIRWORTHINESS APPROVAL: THIS ARTICLE MEETS THE SPECIAL REQUIREMENTS OF CANADA							
<b>14. Certifies the items identified above were manufactured in conformity to:</b>  <input checked="" type="checkbox"/> Approved design data and are in a condition for safe operation  <input type="checkbox"/> Non-approved design data specified in Block 13.			<b>19.</b> <input type="checkbox"/> 14 CFR 43.9 Return to Service <input type="checkbox"/> Other regulation specified in Block 13  Certifies that unless otherwise specified in Block 13, the work identified in Block 12 and described in Block 13 was accomplished in accordance with Title 14, Code of Federal Regulations, part 43 and in respect to that work, the items are approved for return to service.				
<b>15. Authorized Signature:</b> 		<b>16. Approval/Authorization No.:</b> ODA602112NM		<b>20. Authorized Signature</b>		<b>21. Authorized/Certificate No.</b>	
<b>17. Name (typed or printed)</b> Nancy Williamson		<b>18. Date (m/d/y):</b> NOV/19/2011		<b>22. Names (typed or printed)</b>		<b>23. Date (m/d/y):</b>	
<b>User/Installer Responsibilities</b>							
<p>It is important to understand that the existence of this document alone does not automatically constitute authority to install the part/component/assembly. Where the user/installer performs work in accordance with the national regulations of an airworthiness authority different than the airworthiness authority of the country specified in Block 1, it is essential that the user/installer ensures that his/her airworthiness authority accepts parts/components/assemblies from the airworthiness authority of the country specified in Block 1.</p> <p>Statements in Blocks 14 and 19 do not constitute installation certification. In all cases, aircraft maintenance records must contain an installation certification issued in accordance with the national regulations by the user/installer before the aircraft may be flown.</p>							